

Department of Human Services
Division of Alcohol and Drug Abuse

Treatment Activities

Position Paper

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Gib Sudbeck, Director

Executive Summary

The Department of Human Services, Division of Alcohol and Drug Abuse is delineating its position with respect to the treatment of alcohol and other drug use in South Dakota with the following paper. This paper describes the current scenario in which the Division receives and disburses approximately 9.5 million in funds. During fiscal year 2002 (July 1, 2001 – June 30, 2002) a total of 16,879 clients received services through 58 accredited treatment facilities within the State. These clients received services ranging from crisis intervention to structured treatment programs, with many of them receiving multiple services. Historically, funding for treatment services has been based on an agency's production of units of service that were provided to clients. The Division presently evaluates program services by assessing the number and types of services provided throughout the state, together with comprehensive assessment of treatment outcome reports on state funded indigent outpatient and inpatient treatment clients.

This paper also includes further description of each priority area of the treatment services within the state, a list of the Drug and Alcohol abuse Advisory Council members, and a bibliography. It is hoped that this document will be used to assist governmental authorities and community members in their understanding of the Division's treatment activities, and to increase support for such activities in South Dakota.

Introduction

The Department of Human Services, Division of Alcohol and Drug Abuse receives funding from the federal government for the treatment of alcohol and other drug use in South Dakota. These funds are available through the Substance Abuse Prevention and Treatment (SAPT) Block Grant.

Of the projected 4.39 million dollars flowing to South Dakota in FFY03, SAPT Block Grant, at least 95% is to be spent for prevention and treatment activities for alcohol and other drugs. This includes the 20% set aside of \$877,620 to be spent on primary prevention activities. The level of expenditure from the block grant for treatment services designed for pregnant women and women with dependent children will be a minimum of \$277,407.

Also included in the FY03, appropriated budget is \$1,910,731.00 for substance abuse services for the Correctional Substance Abuse Programs. This is a combination of funding through the Edward Byrne Memorial Fund, the Violent Offender Incarceration Truth in Sentencing (VOITIS) Grant, the Residential Substance Abuse Treatment

(RSAT) Grant, the Office of Highway Safety, and State general funds. The total amount to be spent on all prevention, gambling, and treatment activities is approximately 9.5 million during FY03.

Currently, the SAPT prevention and treatment funds are contracted to a wide variety of accredited treatment programs. Agencies which provide alcohol or drug services

presently provide one or more of the following types of accredited services: (1) Prevention; (2) Level 0.5 Early Intervention; (3) Level I Outpatient Treatment; (4) Level II.1 Intensive Outpatient Treatment; (5) Level II.5 Day Treatment (6) Level III.2-D Clinically-Managed Residential Detoxification; (7) Level III.1 Clinically-managed Low-Intensity Residential Services; and (8) Level III.7 Medically-Monitored Intensive Inpatient Treatment for Adolescents and Adults. The American Society of Addiction Medicine Patient Placement Criteria for Substance-Related Disorders (ASAM-PPC-2, Revised) is used as a clinical guide in matching clients to appropriate levels of care.

Treatment services currently focus on clients who have a substance-related disorder that can range from substance abuse, to substance intoxication, to substance dependence, and can include a multitude of diagnoses associated with each specific class of substances.

Priority Activities

The Division has been moving towards funding program components based upon the evaluation of outcomes and identified gaps in the service delivery system. This increased accountability in turn determines the focus of needed prevention and treatment activities throughout the State. The following 4 critical goals are considered to be the highest priorities as a result of several studies conducted in South Dakota as well as nationwide:

Objective: To give high priority for funding to provide statewide technical assistance to accredited alcohol and other drug service providers to assist them in the development of successful continuing care programming, and increase the funding for providing local continuing care services.

Goal 1: To reduce the relapse rate for both adolescent and adult clients that have completed a structured treatment program.

The Division continues to sponsor a Treatment Outcome Evaluation Program for clients admitted to services at accredited facilities. Data was collected between April 1998 and November 2001 from intake, history, and discharge forms on 1945 individuals who completed these programs.

The study shows a positive correlation between continuing care, 12 step program attendance and one-year abstinence rates. For those completing an accredited program in South Dakota 85% were referred for continuing care services and 94.6% were referred to 12 step programs. Nearly half (49.8%) were abstinent one-year post treatment. Clients who attended structured continuing care and/or 12 step programs were much more likely to remain substance free than were those who stopped attending.

Typically, placing more emphasis on continuing care and 12 step program involvement helps improve abstinence rates; those who attend regularly are usually more successful at maintaining abstinence.

Objective: To give high priority for funding to increase the awareness of the risks of drinking or other drug use during pregnancy through information and education. In addition, identification, referral, and the continued development of specialized treatment programming for pregnant, substance-abusing women, and women with dependent children.

Goal 2: To reduce the percentage of pregnant, substance-using women, thereby reducing the incidence of fetal alcohol syndrome/effects births.

In January 2000 the Division implemented two pregnant women's substance-abusing treatment programs. Services include ongoing chemical dependency counseling, medical care (including well baby care), vocational counseling, educational services, assistance with job placement, life skills development, parenting education, emotional and psychological counseling, and preparation and assistance in locating an independent living setting. Since inception 153 women have received services at these facilities.

Effective July 1, 1998, the South Dakota State Legislature amended the guidelines for the emergency and involuntary commitment of alcohol and other drug abusers. Emergency Commitment (34-20A-63) was expanded to provide for the protection of children from prenatal exposure to alcohol and other drugs. Involuntary Commitment (34-20A-70) was amended to include pregnant women abusing alcohol or other drugs.

According to the South Dakota Client Services Summary, during FY02, a total 194 pregnant, substance-abusing women sought alcohol and other drug services. Of these 59% were abusing alcohol, 21% were abusing marijuana, and 5% were abusing methamphetamine. The number of pregnant substance-abusing women has increased steadily since 1999.

Objective: To give high priority to maintain specialized programming for juvenile and adult offenders with a chemical dependency diagnosis while they are in the correctional institutions and following institutional release at community based continuing care programs.

Goal 3: To reduce relapse and recidivism rates for chemically dependent adult and juvenile offenders who are released from correctional facilities.

Both juvenile and adult offenders with chemical dependency diagnoses who are incarcerated in South Dakota Department of Corrections facilities are eligible for chemical dependency treatment and related services which are provided through the Division of Alcohol and Drug Abuse Correctional Substance Abuse Programs. The Correctional Substance Abuse Programs which began in 1988 are funded by the Edward Byrne Memorial Formula Grant Program, the Residential Substance Abuse Treatment Grant, the Violent Offender Incarceration and Truth in Sentencing Grant, the Office of Highway Safety, and State General Funds. Institutional services have been developed specifically for the offender population and have been refined in response to growth and changes in the correctional facilities and population.

During FY02, a total of 527 juveniles received chemical dependency assessments. Approximately 80% resulted in a diagnosis of substance abuse or dependence. A total of 311 juveniles completed some level of service. Following closure of the State Training School in January 2002 the Custer Youth Corrections Center became the primary juvenile institution in the state. Its programs include the Custer Intake Center, the Patrick Henry Brady Boot Camp, and Living Centers A and B for males, and QUEST and ExCEL for females.

During FY02, a total of 1,539 adults received chemical dependency assessments. Approximately 90% resulted in a diagnosis of substance abuse or dependence. A total of 940 completed some level of service. Due to the severity of the problems associated with their alcohol/other drug use many of these individuals would have required inpatient chemical dependency treatment upon release from the institution had services not been available.

In addition, an inpatient relapse program was implemented in July of 2000 to treat adolescents under the supervision of the Department of Corrections who have returned to alcohol or other drug use but do not require a full course of treatment. Approximately 90 adolescents have completed this programming since its inception.

The Division has also implemented services for Parolees under the supervision of the Department of Corrections. The Correctional Substance Abuse Programs currently provides relapse specific treatment at the Yankton Trustee Unit. During FY02, a total of 59 parolees were treated in this program. Of those, 82.1% did not violate their parolee during the 12 month period following release. Parolee services consisting of assessment, outpatient treatment, case management, and referral are also provided by Division staff located at the Rapid City and Sioux Falls Parole Offices.

According to the South Dakota Client Services Summary, during FY02, 49.8% of adults and 35.9% of juveniles did not use alcohol or other drugs during the time they were supervised following institutional discharge.

Objective: To give high priority for funding to provide statewide technical assistance to accredited alcohol and other drug treatment service providers to assist them in the development of specialized programming for Methamphetamine and increase the funding for providing Methamphetamine specific treatment.

Goal 4: To reduce the incidence of Methamphetamine use by both adolescents and adults.

Between the years 1997 and 2000 the incidence of Methamphetamine use remained relatively constant. The South Dakota Client Services Summary, for those fiscal years shows that Methamphetamine was the primary substance of abuse for approximately 1% of all individuals (764) seeking services through an accredited facility. In FY01, a total of 383 individuals who sought services indicated that Methamphetamine was their

primary or secondary substance of abuse. In FY02, that number rose to 414. In the first 5 months of FY03, a total of 258 individuals have sought services. In addition 17% of all individuals who sought indigent funded inpatient treatment services between January and November 2002 indicated that Methamphetamine was their primary substance of abuse and 62% of those indicated that they were intravenous drug users.

In the spring of 2002 the Division drafted a proposal for a grant request to pilot treatment programs for of Methamphetamine addicted clients.

In September 2002 Division staff attended the Midwestern Governors Conference and Summit on Methamphetamine. During that summit, policy recommendations were developed, and subsequently forwarded to the Office of Drug Control Policy. Of primary concern was the need for specialized, long term care for Methamphetamine users.

Past Initiatives

Rate Setting Project - SFY2000

The Department of Human Services Division of Alcohol and Drug Abuse has reviewed the alcohol and other drug rate structure for prevention and treatment services purchased from community based providers. Rates of reimbursement have been adjusted for some service codes. The scope of the adjustments was contingent on the availability of funds.

Pre-Authorization for State Employees and their dependents:

The Division now pre-authorizes all chemical dependency services provided to State employees and their dependents under the State Health Care Plan.

New Initiatives

Methamphetamine Prevention and Treatment:

The increased incidence of Methamphetamine use and manufacture in South Dakota has resulted in increased treatment admissions, as well as law enforcement, correctional, child welfare, and environmental concerns. As an issue that affects areas of society not historically impacted by the use of substances it is incumbent on the Division to take the lead in the coordination of statewide planning in relation to policy, prevention efforts, treatment services, education, training, and funding.

- With the support of the Secretary of the Department of Human Services the Division will work to ensure that Methamphetamine is a statewide priority issue.
- In collaboration with other state and private entities the Division will seek to institute statewide planning to ensure that resources are maximized and activities focused to ensure successful and measurable outcomes.

- In collaboration with community providers the Division will focus on developing specific, long-term Methamphetamine treatment programs to serve the special needs of this population.
- In collaboration with community providers the Division will assist in the development of Methamphetamine specific prevention efforts.
- The Division will continue to seek funding to develop, enhance, and support the prevention and treatment services necessary to the successfully treat the Methamphetamine problem in the state.
- The Division will continue to support the active participation of our state representative to the Midwestern Governor's Task Force on Methamphetamine.
- With the support of the National Crime Prevention Council the Division will seek to hold a South Dakota Governor's Conference on Methamphetamine

Services for Parolees:

As correctional facilities in South Dakota reach and exceed maximum capacity the Department of Corrections may seek to decrease institutional numbers through options such as early release and parole. The correctional population is expected to increase as much as 7.7% over the next 3 years and it will be incumbent on the Division to prioritize services for parolees that are focused on reducing relapse and recidivism. Both the Department of Corrections and Federal entities such as the Office of Justice Programs are now focusing on transitional services for this population. Historically the focus of the Correctional Substance Abuse Programs has been on providing services to those individuals who are incarcerated. The Division currently serves a minimum number of parolees (approximately 400 since May 2001) through the Correctional Substance Abuse Programs located in the Rapid City and Sioux Falls Parole Offices as well as through the Relapse Program located at the Yankton Trustee Unit. In an effort to better serve the needs of the recognized needs of this population the Division will:

- Focus on enhancing the system of care for parolees through the cultivation of grants that support both transitional and on-going services.
- In collaboration with community providers develop community based, relapse specific, short-term inpatient programs for parolees.
- In collaboration with community provides seek to increase the number of available residential beds.
- In collaboration with community providers seek to increase the availability of continuing care services.
- Seek to increase relapse programming through the Department of Corrections Supervision Intervention Programming.
- Create a Correctional Substance Abuse Parole Services Chemical Dependency Coordinator position to provide comprehensive, statewide, management of parolees and services.

Summary

This position paper is the blueprint for further actions regarding alcohol and other drug use treatment in South Dakota. The Division of Alcohol and Drug Abuse submits this paper for review and requests input by the Drug and Alcohol Abuse Advisory Council, other state and community entities, and alcohol and other drug treatment providers. It is hoped that this paper will provide these entities the overview necessary to understand current Division philosophy and future activities.

The Division proposes to concentrate its efforts on 4 specific goals:

1. To reduce the relapse rate for both adolescent and adult clients that have completed a structured treatment program.
2. To reduce the percentage of pregnant, substance-using women, thereby reducing the incidence of fetal alcohol syndrome/effects births.
3. To reduce relapse and recidivism rates for chemically dependent adult and juvenile offenders who are released from correctional facilities.
4. To reduce the incidence of Methamphetamine use by both adolescents and adults.

To accomplish these goals, the Division proposes to prioritize funding to accomplish the following measurable objectives:

1. Statewide technical assistance to accredited alcohol and other drug service providers to assist them in the development of successful continuing care programming, and increase the funding for providing local continuing care services.
2. Statewide networking to increase the awareness of the risks of drinking or other drug use during pregnancy through information and education. In addition to identification, referral, and the continued development of specialized treatment programming for pregnant, substance-abusing women, and women with dependent children.
3. Develop and maintain specialized programming for juvenile and adult offenders with a chemical dependency diagnosis while they are in the correctional institutions and following institutional release at community based continuing care programs.
4. Statewide technical assistance to accredited alcohol and other drug treatment service providers to assist them in the development of specialized programming for Methamphetamine and increase the funding for providing Methamphetamine specific treatment.

Drug and Alcohol Advisory Council

Denise White – Department of Health – Pierre
Wanda Fergen – Office of the Attorney General – Pierre
Jocelyn Prang – Member at Large – Rapid City
Bonnie Gregerson – Member at Large – Sioux Falls
William Barns – Member at Large – Mitchell
James Bartles – Member at Large – Pierre
Dr. Matthew Stricherz – Qualified Mental Health Professional – Vermillion
Janet Ricketts – Department of Education – Pierre
James Ellenbecker – Department of Social Services – Pierre
Mary Carpenter, MD – Medical Professional – Winner
Marla Bull Bear – Chairperson and Member at Large – Winner
Leon Cantin – Member at Large – Yankton
Sylvia Mikkelsen – Member at Large – Gregory
Webster Two-Hawk – Coordinator of Indian Affairs - Pierre

Bibliography

South Dakota Client Services Summary. 2001 (28 pages), 2002 (31 pages).
Department of Human Services, Division of Alcohol and Drug Abuse.

Report on Chemical Dependency Programs. 2001 ((127 pages). Mountain Plains
Research. Bozeman, MT, for the Division of Alcohol and Drug Abuse, Attorney
General's Office, and Department of Corrections – State of South Dakota.